OFFICIAL

Revision: HCFA-PM-90-2

(BPD)

OMB No.: 0938-0193

JANUARY 1990

State/Territory:

RHODE ISLAND

Citation 433.137(a) 50 FR 46652 55 FR 1423

4.22 Third Party Liability

(a) The Medicaid agency meets all requirements of 42 CFR 433.138 and 433.139.

433.138(f) 52 FR 5967 (b) ATTACHMENT 4.22-A --

 Specifies the frequency with which the data exchanges required in \$433.138(d)(1), (d)(3) and (d)(4) and the diagnosis and trauma code edits required in \$433.138(e) are conducted;

433.138(g)(1)(ii) and (2)(ii) 52 FR 5967 (2) Describes the methods the agency uses for meeting the followup requirements contained in §433.138(g)(1)(i) and (g)(2)(i);

433.138(g)(3)(i) and (iii) 52 FR 5967 (3) Describes the methods the agency uses for following up on information obtained through the State motor vehicle accident report file data exchange required under §433.138(d)(4)(ii) and specifies the time frames for incorporation into the eligibility case file and into its third party data base and third party recovery unit of all information obtained through the followup that identifies legally liable third party resources; and

433.138(g)(4)(i) through (iii) 52 FR 5967 (4) Describes the methods the agency uses for following up on paid claims identified under §433.138(e) (methods include a procedure for periodically identifying those trauma codes that yield the highest third party collections and giving priority to following up on those codes) and specifies the time frames for incorporation into the eligibility case file and into its third party data base and third party recovery unit of all information obtained through the followup that identifies legally liable third party resources.

TN No. 90-15 Supersedes TN No. 87-15

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Citation 433.139(b)(3) (i:)(A)

55 FR 1423

17.

.c) Providers are required to bill liable third parties when services covered under the plan are furnished to an individual on whose behalf child support enforcement is being carried out by the State IV-D agency.

(d) ATTACHMENT 4.22-B specifies the following:

433.139(b)(3)(ii)(C) 55 FR 1423

(1) The method used in determining a provider's compliance with the third party billing requirements at \$433.139(b)(3)(ii)(C).

433.139(f)(2) 50 FR 46652

(2) The threshold amount or other guideline used in determining whether to seek recovery of reimbursement from a liable third party, or the process by which the agency determines that seeking recovery of reimbursement would not be cost effective.

433.139(f)(3) 50 FR 46652

(3) The dollar amount or time period the State uses to accumulate billings from a particular liable third party in making the decision to seek recovery of reimbursement.

42 CFR 447.20 55 FR 1423

(e) The Medicaid agency ensures that the provider furnishing a service for which a third party is liable follows the restrictions specified in 42 CFR 447.20.

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OMB No. (MB) Revision: HCFA-PM-91\_8 October 1991 State/Territory: Rhode Island 4.22 (continued) Citation (f) The Medicaid agency has written cooperative 42 CFR 433.151(a) agreements for the enforcement of rights to and 50 FR 46652 collection of third party benefits assigned to the State as a condition of eligibility for medical assistance with at least one of the following: (Check as appropriate.)  $/_{X}$  State title IV-D agency. The requirements of 42 CFR 433.152(b) are met. / Other appropriate State agency(s)--/ Other appropriate agency(s) of another State--/ Courts and law enforcement officials. (g) The Medicaid agency meets the requirements of 42 CFR 433.151(b) 42 CFR 433.153 and 433.154 for making incentive 50 FR 46652 payments and for distributing third party collections. (h) The Medicaid agency specifies the guidelines 1906 of the Act used in determining the cost effectiveness of an employer-based group health plan by selecting one of the following. /7 The Secretary's method as provided in

TN. No. 92-07 Supercedes TN No. 86-09

Approval Date \_\_\_\_\_ 4 302

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the State Medicaid Manual, Section 3910.

determining cost effectiveness on Att.4.22-C.

 $\sqrt{\chi}$  The State provides methods for